

Cedars Park Primary School



Supporting Pupils with Medical Conditions Policy

Issue No	Author/Owner	Date Written	Review Date
001	Fiona Scarlett - SENDCo	January 2023	January 2024

Aims

Cedars Park Primary School understands that it has a responsibility to make the school welcoming and supportive to pupils with medical conditions who currently attend and to those who may enrol in the future. As a school we aim to provide all children with medical conditions the same opportunities as others at the School.

This policy aims to ensure that:

- Pupils, staff and parents understand how our school will support pupils with medical conditions
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities

The Trust Board will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupils' conditions, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- Providing supply teachers with appropriate information about the policy and relevant pupils
- Developing and monitoring individual healthcare plans (IHPs)

This policy meets the school's statutory requirements under section 100 of the Children and Families Act 2014 which places a duty on governing bodies of maintained schools, to make arrangements for supporting pupils at their school with medical conditions. This Policy pays due regard to the Department for Education's statutory guidance Supporting Pupils at School Medical Conditions.

Roles and Responsibilities

The Trust Board

The Trust Board has ultimate responsibility to make arrangements to support pupils with medical conditions. The Trust Board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

The Head Teacher

The Head Teacher will:

- Make sure all staff are aware of this policy and understand their role in its implementation
- Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations
- Ensure that all staff who need to know are aware of a child's condition
- Take overall responsibility for the development of IHPs

- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- Contact the school nursing service in the case of any pupil who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

Staff

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so. Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

Parents

Parents will:

- Provide the school with sufficient and up-to-date information about their child's medical needs
- Be involved in the development and review of their child's IHP and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times

Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.

School nurses and other healthcare professionals

Our school nursing service will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible. They may also support staff to implement a child's IHP.

Healthcare professionals, such as GPs and paediatricians, will liaise with the school's nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

The School Nurse can be contacted on 0345 607 8866 or email childrenshealth@suffolk.gov.uk

Staff Training & Support

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with Fiona Scarlett (SENCo). Training will be kept up to date.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils
- Fulfil the requirements in the IHPs
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

Managing Medication

Prescription medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so and where we have parents' written consent (Appendix four and five). This will be considered on a case by case basis. Medication which has not been prescribed by a health care professional will not be administered by school staff.

Pupils under 16 will not be given medicines containing aspirin unless prescribed by a doctor.

The school will only accept prescribed medicines that are:

- In-date
- Labelled container
- Dispensary label, clearly stating the child's name
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely. Pupils will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to pupils and not locked away.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

Controlled Drugs

Controlled drugs are prescription medicines that are controlled under the Misuse of Drugs Regulations 2001 and subsequent amendments, such as morphine or methadone. All other controlled drugs are kept in a secure cupboard in the school office and only named staff have access. Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

School staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines should do so in accordance with the prescriber's instructions. Schools should keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted in school.

Record Keeping

The Trust Board will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school (Appendix Two). Parents will be informed if their pupil has been unwell at school. IHPs are kept in a readily accessible place which all staff are aware of.

Individual Healthcare Plans

When the school is notified that a pupil has a medical condition, the process outlined in appendix two will be followed to decide whether the pupil requires an Individual Healthcare Plan (appendix Three).

The school will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

The Head Teacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to Fiona Scarlett (SENCo).

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed. Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and/or the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the Head Teacher will make the final decision.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has SEN but does not have an EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The Trust Board and the SENCo with responsibility for developing IHPs, will consider the following when deciding what information to record on IHPs:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons
- Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions
- The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable
- Who in the school needs to be aware of the pupil's condition and the support required
- Arrangements for written permission from parents and the Headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. risk assessments
- Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition
- What to do in an emergency, including who to contact, and contingency arrangements

Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHP and inform parents so that an alternative option can be considered, if necessary.

Emergency Procedures

The Trust Board should ensure that the school's policy sets out what should happen in an emergency situation. Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' IHPs will clearly set out what constitutes an emergency and will explain what to do.

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives, or accompany the pupil to hospital by ambulance.

Educational Visits and School Trips

So far as is reasonably practicable, students should not face barriers to educational visits and school trips, including residential overnight trips, due to issues regarding medicine and medical conditions. As part of requesting consent for the trip, parents / carers should again be asked to list any medical conditions. This ensures that the school has an up to date list of any new medical conditions that may have been diagnosed since the start of the school year. Educational visits and school trips make use of a system called Evolve.

Prior to the Educational Visits Coordinator in each school signing off on any trip the following needs to be in place:

- This policy must be followed when planning and undertaking any educational visits
- All parents/carers are required to complete and sign a residential visit form and return it to school shortly before their child leaves for an overnight or extended day visit. This form requests up-to-date information about the child's current condition and their overall health including details about medication which is not normally taken during school hours
- Any medicines that are being taken on the trip should be in date, in original packaging with prescribers instructions contained and clearly labelled as belonging to the student
- Any student who has an individual healthcare plan, including asthma or allergies, should have a copy of this plan stored with their medication
- Individual healthcare plans must include contingency measures that account for the school having care of the student in what may be a different location and for different time periods, for example, on a residential trip the plan needs to account for the school caring overnight for the student
- The staffing contingent will include staff who have had the specific training required to meet the medical needs of the students on the trip, if necessary
- Prior to the trip staff will have made plans regarding meals and environment for any students with an allergy
- Prior to the trip it should be made clear to both students and parents that students are not permitted to hold onto their own medication

Equal Opportunities

The Trust Board will ensure that the school enables pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

The school acknowledges the Equalities Act 2010 and schools and works proactively to support all its pupils.

Unacceptable Practice

School staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is generally not acceptable to:

- Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every pupil with the same condition requires the same treatment
- Ignore the views of the pupil or their parents
- Ignore medical evidence or opinion (although this may be challenged)
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs
- If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable

- Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- Require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their pupil, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs
- Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

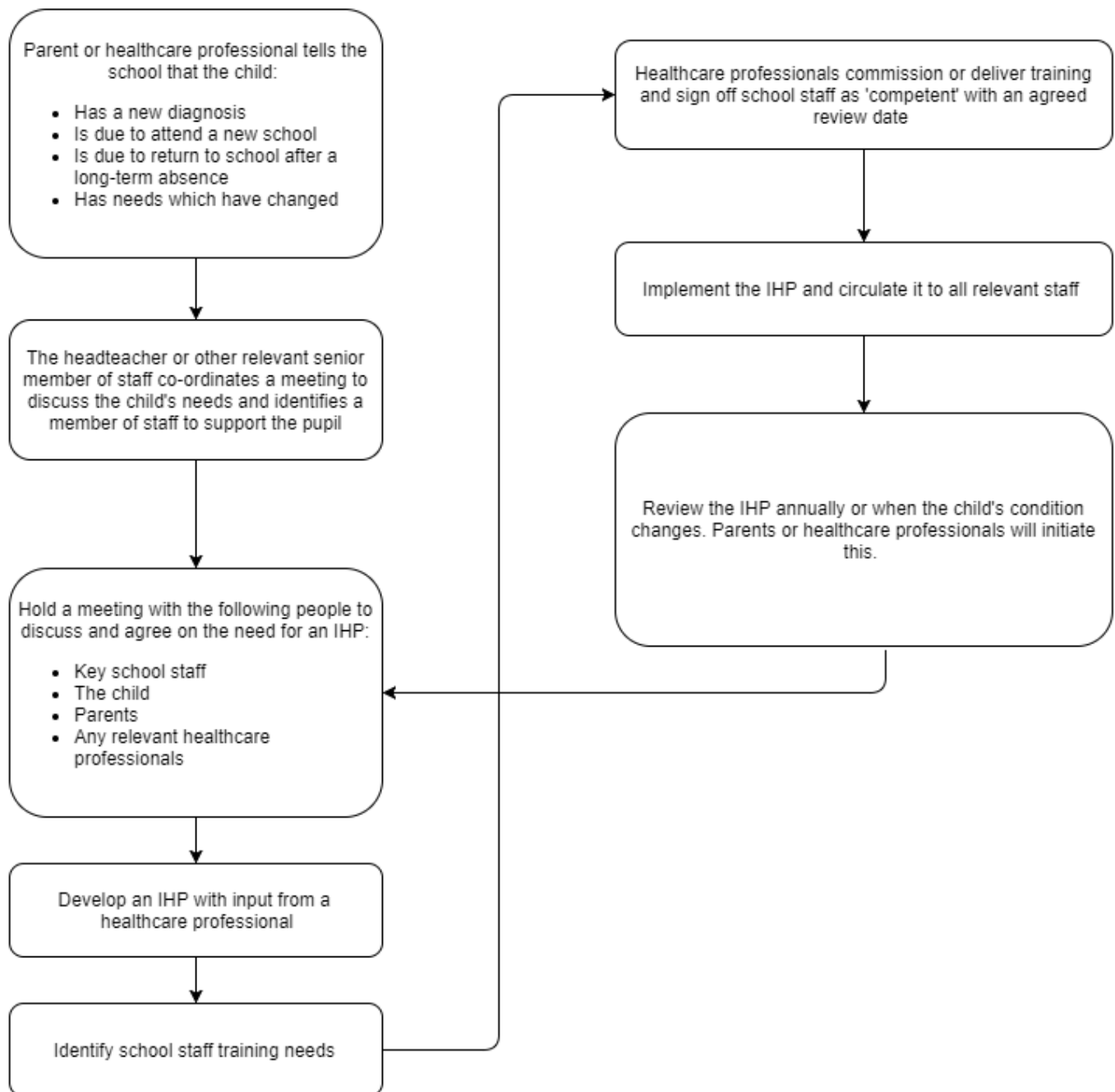
Liability and Indemnity

The Trust Board will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.

Complaints

Parents with a complaint about their child's medical condition should discuss these directly with Fiona Scarlett (SENCo) in the first instance. If the SENCo cannot resolve the matter, they will direct parents to the school's complaints procedure.

Appendix Two: Being notified a child has a medical condition



Appendix Three: Individual Health Care Plan

Cedars Park Individual Health Plan

Childs Name:		Date of Birth:	
Year Group:		Date written:	
Class:		Review Date:	
Plan developed with:			

Medical Condition

Family Contact Information: Priority One			
Name:			
Telephone Work:		Telephone Home:	
Telephone Mobile:		Relationship to Child:	

Family Contact Information: Priority Two			
Name:			
Telephone Work:		Telephone Home:	
Telephone Mobile:		Relationship to Child:	

Clinical Hospital Contact			
Name:		Telephone:	

GP Contact			
Name:		Telephone:	

Who is responsible for providing support in school?			
Name:		Role:	
Name:		Role:	

Appendix Four: Medication Consent Form

Medical Needs:

Signs, Symptoms and triggers:

Treatment (facilities, equipment or devices needed):

Medication:

Name of medication and dose:

Method of administration, when to be taken, side effects, contra indications, administration/supervision

Daily care requirements:

Emergency Procedure:

Describe what constitutes an emergency, and the action to be taken if this occurs

Who is responsible in an emergency?

Appendix Five: Asthma Medication Form

Asthma Medication

Child's Name:		Date of Birth:	
Class:		Year Group:	

Medical Condition:	
Name/ Type of reliever inhaler: (name & colour)	

Dosage and Method: (How many puffs? Does your child use a spacer?)	
Timing: (Please list the symptoms your child will exhibit if they require their reliever inhaler.)	E.g. wheezing, tightening of chest, continues coughing, finding it hard to breath
Side Effects:	
Procedure to take in an emergency: (Please describe what an asthma attack looks like for your child and what action should be taken.)	

I agree that the medical information contained in this form may be shared with individuals involved with the care and education of my child.

I understand that I must immediately notify the school in writing, if there are any changes to the information provided on this form.

I have attached an Asthma Care Plan for my child from their GP or Asthma Nurse.

In the event of my child displaying symptoms of asthma, and if their inhaler and spare inhaler are not available or are unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies.

I have provided the school with the above medication in its original packaging. Please note that it is the parent or careers responsibility to ensure this is within date.

When does your child's inhaler expire? __/__/__

I, the parent/ carer of the above child, request and give permission for the Head teacher, or person acting on his/her authority, to administer the above medication in emergency circumstances and in accordance with the directions given. I understand that neither the Headteacher, nor John Milton Academy Trust, will be liable for any illness or injury to the child arising from the administering of the medicine or drug unless caused by negligence of the Headteacher, their person acting on his/her authority, the Governing Body or John Milton Academy Trust, as the case may be.

Form completed by:	
Relationship to child:	
Date:	

